

CHECKLIST - FY 05 LIBRARIAN ACTEDS PROFESSIONAL DEVELOPMENT

IMMEDIATELY UPON YOUR SELECTION FOR ACTEDS TRAINING do the following :

1. ____ Make travel and lodging reservations. Airline reservations **must** be made through your government contract travel office. Indicate that the travel fare is to be charged to a centrally-billed account (CBA).
2. ____ Ask your supervisor to register in RASS. See Tips for RASS for explanation.
3. ____ Complete DD 1556 and 1610 using the Resource Allocation Selection System (RASS) at <http://www.cpol.army.mil/library/train/rass/> by the date given in your Notification of Selection letter. **See Tips for RASS.**
4. ____ Verify that your supervisor has approved your RASS forms within 5 days after submission.
5. ____ Verify forms have been approved by CP-34 (IC/FCR) and Budget Analyst as stated in Tips for RASS. Save and print the **approved DD Forms 1610 and 1556** from RASS in pdf format.
6. ____ Send copies of the approved DD Forms 1610 and 1556 to this office for review, email by pdf if possible. This office will notify you of final approval.
7. ____ Register for training after you have received final approval. Send a copy of the **approved DD 1556** with your registration form to the training vendor. Please include this statement to the vendor:

This training will be paid by the attached Government Purchase Order DD 1556. For payment send the DD 1556 and invoice to the address in Block 37 of the DD 1556. Please include Tax ID and electronic funds transfer (EFT) information.

8. ____ Request a detailed hotel receipt that includes a breakdown of daily room rates and taxes.
9. ____ Take copies of the forms with you to your training. These forms verify that you are a government employee on TDY and are needed in the event of an accident, medical problem, etc.

WITHIN 5 DAYS OF COMPLETION OF TRAINING do the following:

10. ____ Complete and submit your signed **travel claim (DD Form 1351-2)** to DFAS.

DFAS Travel Pay Services

Attn: Dept 3700

8899 E. 56th Street

Indianapolis, In 46249

FAX: (317) 510-6213

(for additional information see <http://www.dfas.mil/money/travel/in-activetravel.htm>)

Submission must include original DD Form 1610 Request & Authorization for TDY Travel and all amendments, original DD Form 1351-2 Travel Voucher or Subvoucher, and all receipts. If your registration fee included meals, this information must be included on your request for reimbursement.

AS SOON AS POSSIBLE AFTER COMPLETION OF TRAINING send the following to this office:

11. ____ **Completed training assessment.**
12. ____ **DFAS reimbursement voucher** upon receipt from DFAS.
13. ____ **Travel receipt/itinerary** showing commercial travel fare (send with above paid voucher).